

**UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF PENNSYLVANIA
ERIE DIVISION**

In re:

MICHAEL JOHNSON
MARY JOHNSON
Debtor(s)

Case No. 12-11327TPA

CHAPTER 13 STANDING TRUSTEE'S FINAL REPORT AND ACCOUNT

Ronda J. Winnecour, chapter 13 trustee, submits the following Final Report and Account of the administration of the estate pursuant to 11 U.S.C. § 1302(b)(1). The trustee declares as follows:

- 1) The case was filed on 09/20/2012.
- 2) The plan was confirmed on 11/27/2012.
- 3) The plan was modified by order after confirmation pursuant to 11 U.S.C. § 1328 on 04/02/2013.
- 4) The trustee filed action to remedy default by the debtor in performance under the plan on NA.
- 5) The case was completed on 09/05/2017.
- 6) Number of months from filing to last payment: 60.
- 7) Number of months case was pending: 63.
- 8) Total value of assets abandoned by court order: NA.
- 9) Total value of assets exempted: \$27,714.09.
- 10) Amount of unsecured claims discharged without payment: \$10,912.44.
- 11) All checks distributed by the trustee relating to this case have cleared the bank.

Receipts:

Total paid by or on behalf of the debtor	\$79,470.98
Less amount refunded to debtor	\$1,041.33

NET RECEIPTS:	\$78,429.65
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Expenses of Administration:

Attorney's Fees Paid Through the Plan	\$3,050.00
Court Costs	\$0.00
Trustee Expenses & Compensation	\$2,951.82
Other	\$0.00
TOTAL EXPENSES OF ADMINISTRATION:	\$6,001.82

Attorney fees paid and disclosed by debtor:	\$650.00
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Scheduled Creditors:

Creditor Name	Class	Claim Scheduled	Claim Asserted	Claim Allowed	Principal Paid	Int. Paid
AFNI++	Unsecured	201.95	NA	NA	0.00	0.00
AMERIPATH	Unsecured	50.00	NA	NA	0.00	0.00
ASSET CARE	Unsecured	326.50	NA	NA	0.00	0.00
CBJ CREDIT RECOVERY	Unsecured	367.00	NA	NA	0.00	0.00
CHARTER ONE	Unsecured	0.00	NA	NA	0.00	0.00
CONNEAUT LAKE AMBULANCE	Unsecured	100.75	NA	NA	0.00	0.00
CONSULTANTS IN CARDIOLOGY	Unsecured	32.25	NA	NA	0.00	0.00
CRAWFORD COUNTY TAX CLM BUR	Secured	845.17	845.17	845.17	845.17	161.57
CRAWFORD COUNTY TAX CLM BUR	Secured	10,629.94	10,629.94	10,629.94	10,629.94	2,031.20
DIAGNOSTIC IMAGING CONSULTAN	Unsecured	456.47	NA	NA	0.00	0.00
DOMINION RETAIL INC*	Unsecured	1,225.50	1,225.50	1,225.50	0.00	0.00
EUCLID HOSPITAL	Unsecured	0.00	NA	NA	0.00	0.00
FIRST FEDERAL CREDIT CONTROL	Unsecured	48.00	NA	NA	0.00	0.00
GEMB/JCPENNEY++	Unsecured	0.00	NA	NA	0.00	0.00
GMAC*	Unsecured	0.00	NA	NA	0.00	0.00
GREENVILLE MEDICAL CENTER	Unsecured	76.53	NA	NA	0.00	0.00
HAMOT MEDICAL CENTER*	Unsecured	2,326.99	NA	NA	0.00	0.00
HAND & ARTHRITIS REHAB CTR	Unsecured	435.49	NA	NA	0.00	0.00
MEADVILLE AREA AMBULANCE SEI	Unsecured	150.02	NA	NA	0.00	0.00
MEADVILLE DIAGNOSTIC MEDICAL	Unsecured	10.78	NA	NA	0.00	0.00
MEADVILLE MEDICAL CENTER	Unsecured	376.59	NA	NA	0.00	0.00
MEADVILLE SURGICAL ASSOCIATES	Unsecured	523.16	NA	NA	0.00	0.00
MEDICOR ASSOCIATES INC	Unsecured	367.46	NA	NA	0.00	0.00
NATIONAL RECOVERY AGENCY GR	Unsecured	101.00	NA	NA	0.00	0.00
NCO FINANCIAL SYSTEMS INC(*)++	Unsecured	187.00	NA	NA	0.00	0.00
NCO FINANCIAL SYSTEMS INC(*)++	Unsecured	150.00	NA	NA	0.00	0.00
NCO FINANCIAL SYSTEMS INC(*)++	Unsecured	105.00	NA	NA	0.00	0.00
NCO FINANCIAL SYSTEMS INC(*)++	Unsecured	56.00	NA	NA	0.00	0.00
NORTHSHERE CLINIC ASSOC	Unsecured	172.75	NA	NA	0.00	0.00
NSSJMA	Secured	1,440.99	NA	1,440.99	1,440.99	145.08
OXFORD MANAGEMENT SVCS++	Unsecured	137.71	NA	NA	0.00	0.00

Scheduled Creditors:

Creditor Name	Class	Claim Scheduled	Claim Asserted	Claim Allowed	Principal Paid	Int. Paid
PENN POWER/FIRST ENERGY**	Unsecured	124.42	124.42	124.42	0.00	0.00
PETER F WHITE MD	Unsecured	108.81	NA	NA	0.00	0.00
PNC BANK FORMERLY NATIONAL C	Unsecured	0.00	NA	NA	0.00	0.00
PNC BANK NA	Secured	126,909.00	131,237.57	0.00	44,587.62	0.00
PNC BANK NA	Secured	0.00	5,443.48	5,443.48	5,443.48	0.00
PNC BANK NA	Secured	6,747.00	6,576.18	6,576.18	6,576.18	566.60
SHARP COLLECTIONS	Unsecured	0.00	NA	NA	0.00	0.00
ST JOSEPH HEALTH CNTR	Unsecured	265.00	NA	NA	0.00	0.00
TRUMBULL RADIOLOGIST	Unsecured	48.00	NA	NA	0.00	0.00
UNIVERSITY DENTAL HEALTH++	Unsecured	136.30	NA	NA	0.00	0.00
UPMC GREENVILLE	Unsecured	33.76	NA	NA	0.00	0.00
UPMC HORIZON(*)	Unsecured	2,009.86	NA	NA	0.00	0.00
UPMC PHYSICIAN SERVICES++	Unsecured	201.39	NA	NA	0.00	0.00

Summary of Disbursements to Creditors:

	Claim Allowed	Principal Paid	Interest Paid
Secured Payments:			
Mortgage Ongoing	\$6,576.18	\$51,163.80	\$566.60
Mortgage Arrearage	\$5,443.48	\$5,443.48	\$0.00
Debt Secured by Vehicle	\$0.00	\$0.00	\$0.00
All Other Secured	\$12,916.10	\$12,916.10	\$2,337.85
TOTAL SECURED:	\$24,935.76	\$69,523.38	\$2,904.45
Priority Unsecured Payments:			
Domestic Support Arrearage	\$0.00	\$0.00	\$0.00
Domestic Support Ongoing	\$0.00	\$0.00	\$0.00
All Other Priority	\$0.00	\$0.00	\$0.00
TOTAL PRIORITY:	\$0.00	\$0.00	\$0.00
GENERAL UNSECURED PAYMENTS:	\$1,349.92	\$0.00	\$0.00

Disbursements:

Expenses of Administration	<u>\$6,001.82</u>
Disbursements to Creditors	<u>\$72,427.83</u>
TOTAL DISBURSEMENTS :	<u>\$78,429.65</u>

12) The trustee certifies that, pursuant to Federal Rule of Bankruptcy Procedure 5009, the estate has been fully administered, the foregoing summary is true and complete, and all administrative matters for which the trustee is responsible have been completed. The trustee requests a final decree be entered that discharges the trustee and grants such other relief as may be just and proper.

Dated: 12/28/2017

By: /s/ Ronda J. Winneccour

Trustee

STATEMENT: This Unified Form is associated with an open bankruptcy case, therefore, Paperwork Reduction Act exemption 5 C.F.R. § 1320.4(a)(2) applies.